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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Kamala Harris for Senate 777 S. Figueroa Street ADDRESS (number and street) **Suite 4050** (Check if address is changed) Los Angeles 90017 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lbeaver@kaufmanlegalgroup.com (Check if address is changed) Optional Second E-Mail Address sshin@kaufmanlegalgroup.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00571919 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kosoglu, Rohini, , , Type or Print Name of Treasurer Kosoglu, Rohini, , , [Electronically Filed] 01 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	nplete the candidate
Nam Cand	e of didate	Harris, Kamala, D, ,	
	didate / Affiliati	on DEM Office Sought: House X Senate President	State CA District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	·
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee	ee Name	
Kamala Hai	rris for Senate	
6. Name of Any Conn	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
Friends of Kama	la Harris 	
	777 S Figures St Suite 4050	
Mailing Address	777 S Figueroa St Suite 4050	
	Los Angeles CA 90017	
	CITY STATE	ZIP CODE
Relationship: Co	onnected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Record books and records.	rds: Identify by name, address (phone number optional) and position of the person in p	oossession of committee
Full Name Mailing Address	aufman, Stephen, J., , 777 S Figueroa St Suite 4050	
-	I , <u>, , , , , , , , , , , , , , , , , ,</u>	
	Los Angeles CA 90017	
Title or Position	CITY STATE	ZIP CODE
Counsel		452 6565
Treasurer: List the nany designated agent	name and address (phone number optional) of the treasurer of the committee; and the it (e.g., assistant treasurer).	name and address of
Full Name Ko	osoglu, Rohini, , ,	
Mailing Address	777 S Figueroa St Suite 4050	
	Los Angeles CA 90017	
Title or Position Treasurer	CITY STATE	ZIP CODE 452 6565
<u> </u>	Telephone number =	

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Full Name of Designated Agent	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
Banks or Other safety deposit be Name of Bank, I	r Depositories: List all banks or other depositories in which the committee deposits funds, ho oxes or maintains funds. Depository, etc. California Bank & Trust	olds accounts, rents
safety deposit bo	Depository, etc. California Bank & Trust 777 S Figueroa St Suite 4050	
safety deposit be Name of Bank, I	oxes or maintains funds. Depository, etc. California Bank & Trust ,777 S Figueroa St Suite 4050	
safety deposit be Name of Bank, I	Depository, etc. California Bank & Trust 777 S Figueroa St Suite 4050	
safety deposit be Name of Bank, I	California Bank & Trust 777 S Figueroa St Suite 4050 Los Angeles CITY STATE	7
safety deposit be Name of Bank, I	Depository, etc. California Bank & Trust 777 S Figueroa St Suite 4050 Los Angeles CITY CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, I Mailing Address	Depository, etc. California Bank & Trust 777 S Figueroa St Suite 4050 Los Angeles CITY CITY STATE Depository, etc.	ZIP CODE
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